

Exhibit A-5

HENLEY-YOUNG JUVENILE JUSTICE CENTER

Supervisor Incident Report Checklist

CHECKLIST

EACH INCIDENT REPORT WRITTEN WILL REQUIRE SUPERVISORS TO COMPLETE THE CHECKLIST. IF STAFF ANSWER NO TO ANY QUESTION, THE SUPERVISOR SHALL PERFORM A CORRECTIVE ACTION FOR STAFF TO CORRECT ANY ISSUE(S) WITH THE SUBMITTED REPORT BEFORE SUBMITTING TO ADMINISTRATION.

Resident Name: [REDACTED]

Date of Incident: 2-5-22

1. Did staff accurately state the who, what, when, and where in narrative? ☒ Yes ☐ No
2. Was verbal de-escalation used to de-escalate the situation? ☒ Yes ☐ No ☐ N/A
3. Is verbal de-escalation documented in the report? ☒ Yes ☐ No ☐ N/A
4. Was the nurse notified? ☒ Yes ☐ No ☐ N/A (If yes, please attach medical report)
5. Checked for spelling, grammar and adequate details? ☒ Yes ☐ No
6. All sections filled out completely? ☒ Yes ☐ No (If no, please send report back for corrections)
7. Was force used? ☒ Yes ☐ No If yes, state techniques used
CPT Child Restraint Technique
8. Did staff thoroughly document all use of force techniques used? ☒ Yes ☐ No ☐ N/A
9. Was Mental Health notified? ☒ Yes ☐ No ☐ N/A Mr. Drake
10. Youth Support Specialists notified? ☐ Yes ☐ No ☒ N/A
11. Did staff properly document the use of mechanical restraints? ☐ Yes ☐ No ☒ N/A
12. All staff involved submitted a report? ☒ Yes ☐ No

COMMENTS

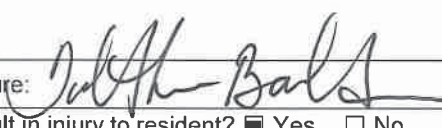
Supervisor Signature: [Signature]Date: 2-5-22

HENLEY-YOUNG JUVENILE JUSTICE CENTER**UNUSUAL INCIDENT REPORT****INFORMATION ABOUT THE INCIDENT AND PERSON INVOLVED**

(1) Resident Name: Apod Residents		(2) Resident Name:	
(3) Resident Name:		Date of Occurrence: 2/5/2022	
Time of Occurrence: 1330 pm		Time of Report: 1600	
Person Reporting: SYCP Tabetha Bouldin		Location of Incident: Rec Yard	
Type of Incident/Infraction Code: Fight			

NARRATIVE (Describe what happen, how it happen, and factors leading to the incident. Was any verbal reasoning used to de-escalate the situation initially and/or during the incident? Be as specific as possible)

On February 5th, 2022 at approximately 1330, I, SYCP Tabetha Bouldin responded to a code yellow on the Rec Yard. I SYCP Tabetha Bouldin helped by assisting to get the boys to their rooms. Once everything was under control, I notified Mr.Crisler to let him know what was going on. I, SYCP Tabetha Bouldin received a weapon by YCP Christopher Griffith and I, SYCP Tabetha Bouldin put the weapon in evidence.

Staff Signature: 	Date: 2/5/2022
Incident result in injury to resident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incident result in Injury to staff? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, was treatment received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Restraints used on resident #1, #2, or #3? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	For how long? n/a
If so, what kind of restraints? Choose an item	

STAFF INVOLVED

List below the title, and names of all the officers/staff involved.

Title	Staff Name	Reason for Involvement
Youth Care Professional	Tamicia Hamilton	On Duty
Youth Care Professional	Chris McGee	On Duty
Youth Care Professional	Chris Griffith	On Duty
Youth Care Professional	Dino Pickett	On Duty
Youth Care Professional	Johanna Waits	On Duty

EVENTS LEADING TO THE INCIDENT (place an (X) by the appropriate event) Searches <input type="checkbox"/> Assault on staff <input type="checkbox"/> Assault on a resident <input checked="" type="checkbox"/> Non-compliance <input checked="" type="checkbox"/> Court appearance <input type="checkbox"/> Moving to another room <input type="checkbox"/> Other: <input type="checkbox"/>	THE CIRCUMSTANCE WHY FORCE WAS USED (place an (X) by the appropriate event) Preventing injury to self <input checked="" type="checkbox"/> Preventing injury to staff <input checked="" type="checkbox"/> Preventing injury to other resident <input checked="" type="checkbox"/> Preventing damage to property <input type="checkbox"/> Preventing an escape <input type="checkbox"/> Other: <input type="checkbox"/>
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EMERGENCY BEHAVIOR MANAGEMENT CONFINEMENT

Emergency behavior management confinement shall only be a cooling off period for residents where placement of the resident in a room either locked or unlocked for the purpose of controlling out of control behavior, restoring order, correcting undesirable behavior and to achieve compliance with behavioral rules and expectations.

Was the resident placed in EBMC? ☒ Yes ☐ No

Date IN	Time IN	Date OUT	Time OUT
2/5/2022	1330pm		

Shift Supervisor Approved EBMC? ☒ Yes ☐ No

Signature _____

HENLEY-YOUNG JUVENILE JUSTICE CENTER


UNUSUAL INCIDENT REPORT

INFORMATION ABOUT THE INCIDENT AND PERSON INVOLVED

(1) Resident Name: Apod Residents		(2) Resident Name:	
(3) Resident Name:		Date of Occurrence: 2/5/2022	
Time of Occurrence: 1330 pm		Time of Report: 1601	
Person Reporting: YCP Christopher McGee		Location of Incident: Rec Yard	
Type of Incident/Infraction Code: Fight			

NARRATIVE (Describe what happen, how it happen, and factors leading to the incident. Was any verbal reasoning used to de-escalate the situation initially and/or during the incident? Be as specific as possible)

On the approximately 1330, gang fight amongst A-pod which involved [REDACTED] and [REDACTED]. Prior to the incident, all residents stated above were verbally assaulting each other until I told all residence to cease everything or we're going back inside and lockdown early. After everything ended [REDACTED] pulled out a "shank" and things escalated. YCP Griffith called, "code yellow". Myself and YCP Griffith held them off until YCP Waits and YCP Pickett arrived. [REDACTED] hit [REDACTED] in the eye and ran. [REDACTED] had to be seen by the nurse and transported to the hospital.

Staff Signature: 	Date: 2/5/2022
Incident result in injury to resident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incident result in Injury to staff? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, was treatment received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Restraints used on resident #1, #2, or #3? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	For how long? n/a
If so, what kind of restraints? Choose an item	

STAFF INVOLVED

List below the title, and names of all the officers/staff involved.

Title	Staff Name	Reason for Involvement
Youth Care Professional	Tamicia Hamilton	On Duty
Youth Care Professional	Chris McGee	On Duty
Youth Care Professional	Chris Griffith	On Duty
Youth Care Professional	Dino Pickett	On Duty
Youth Care Professional	Johanna Waits	On Duty

EVENTS LEADING TO THE INCIDENT (place an (X) by the appropriate event)	THE CIRCUMSTANCE WHY FORCE WAS USED (place an (X) by the appropriate event)
Searches <input type="checkbox"/>	Preventing injury to self <input checked="" type="checkbox"/>
Assault on staff <input type="checkbox"/>	Preventing injury to staff <input checked="" type="checkbox"/>
Assault on a resident <input checked="" type="checkbox"/>	Preventing injury to other resident <input checked="" type="checkbox"/>
Non-compliance <input checked="" type="checkbox"/>	Preventing damage to property <input type="checkbox"/>
Court appearance <input type="checkbox"/>	Preventing an escape <input type="checkbox"/>
Moving to another room <input type="checkbox"/>	Other: <input type="checkbox"/>
Other: <input type="checkbox"/>	

EMERGENCY BEHAVIOR MANAGEMENT CONFINEMENT

Emergency behavior management confinement shall only be a cooling off period for residents where placement of the resident in a room either locked or unlocked for the purpose of controlling out of control behavior, restoring order, correcting undesirable behavior and to achieve compliance with behavioral rules and expectations.

Was the resident placed in EBMC? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Date IN	Time IN	Date OUT	Time OUT
2/5/2022	1330pm		

Shift Supervisor Approved EBMC? ☒ Yes ☐ No

Signature _____

HENLEY-YOUNG JUVENILE JUSTICE CENTER

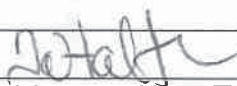
UNUSUAL INCIDENT REPORT

INFORMATION ABOUT THE INCIDENT AND PERSON INVOLVED

(1) Resident Name: Fight		(2) Resident Name:	
(3) Resident Name:		Date of Occurrence: 2/5/2022	
Time of Occurrence: 1330 pm		Time of Report: 1445 pm	
Person Reporting: YCP Tamica Hamilton		Location of Incident: Rec Yard	
Type of Incident/Infraction Code: Fight			

NARRATIVE (Describe what happen, how it happen, and factors leading to the incident. Was any verbal reasoning used to de-escalate the situation initially and/or during the incident? Be as specific as possible)

On the day of February 5th of 2022 at the time of 1320 p.m , I, YCP Officer Tamicia Hamilton heard the CODE YELLOW over the radio and immediately put my residents up to help assist. I, YCP Officer Tamicia Hamilton was notified by SYCP Officer Tabettha Bouldin to get male assistance to break up the incident. I, YCP Tamicia Hamilton ran to B Pod to get YCP Officer Dino Pickett. YCP Officer Dino Pickett ran to the rec yard to help assist. While YCP Dino Pickett assisted with the fight on the rec yard, I, YCP Officer Tamicia Hamilton was able to help assist with the Bpod.

Staff Signature: 	Date: 2/5/2022
Incident result in injury to resident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incident result in Injury to staff? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, was treatment received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Restraints used on resident #1, #2, or #3? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	For how long? n/a
If so, what kind of restraints? Choose an item	

STAFF INVOLVED

List below the title, and names of all the officers/staff involved.

Title	Staff Name	Reason for Involvement
Youth Care Professional	Tamicia Hamilton	On Duty
Youth Care Professional	Chris McGee	On Duty
Youth Care Professional	Chris Griffith	On Duty
Youth Care Professional	Dino Pickett	On Duty
Youth Care Professional	Johanna Waits	On Duty

EVENTS LEADING TO THE INCIDENT (place an (X) by the appropriate event)	THE CIRCUMSTANCE WHY FORCE WAS USED (place an (X) by the appropriate event)
Searches <input type="checkbox"/>	Preventing injury to self <input checked="" type="checkbox"/>
Assault on staff <input type="checkbox"/>	Preventing injury to staff <input checked="" type="checkbox"/>
Assault on a resident <input checked="" type="checkbox"/>	Preventing injury to other resident <input checked="" type="checkbox"/>
Non-compliance <input checked="" type="checkbox"/>	Preventing damage to property <input type="checkbox"/>
Court appearance <input type="checkbox"/>	Preventing an escape <input type="checkbox"/>
Moving to another room <input type="checkbox"/>	Other: <input type="checkbox"/>
Other: <input type="checkbox"/>	

EMERGENCY BEHAVIOR MANAGEMENT CONFINEMENT

Emergency behavior management confinement shall only be a cooling off period for residents where placement of the resident in a room either locked or unlocked for the purpose of controlling out of control behavior, restoring order, correcting undesirable behavior and to achieve compliance with behavioral rules and expectations.

Was the resident placed in EBMC? ☒ Yes ☐ No

Date IN	Time IN	Date OUT	Time OUT
2/5/2022	1320pm		

Shift Supervisor Approved EBMC? ☒ Yes ☐ No


Signature _____

HENLEY-YOUNG JUVENILE JUSTICE CENTER**UNUSUAL INCIDENT REPORT****INFORMATION ABOUT THE INCIDENT AND PERSON INVOLVED**

(1) Resident Name: Apod Residents		(2) Resident Name:	
(3) Resident Name:		Date of Occurrence: 2/5/2022	
Time of Occurrence: 1330 pm		Time of Report: 1526 pm	
Person Reporting: YCP Dino Pickett		Location of Incident: Rec Yard	
Type of Incident/Infraction Code: Fight			

NARRATIVE (Describe what happen, how it happen, and factors leading to the incident. Was any verbal reasoning used to de-escalate the situation initially and/or during the incident? Be as specific as possible)

On February 5th, 2022 at approximately 1330, I, YCP Dino Pickett was supervising phone calls for B Pod. I, YCP Dino Pickett heard a code yellow over the radio. I, YCP Dino Pickett immediately lock down my unit and was releaved by YCP Officer Tamicia Hamilton. I proceeded to the rec yard where I saw YCP Officer Johanna Waits, YCP Officer Christopher Magee and YCP Officer Christopher Griffith attempting break up a fight between the residents of A Pod. YCP Officer Johanna Waits was trying to secure [REDACTED] YCP Officer Christopher Griffith had three residents secured on the basketball court. I, YCP Dino Pickett secured [REDACTED] SYCP Bouldin was escorting [REDACTED] off the rec yard when [REDACTED] struck [REDACTED] and proceed to lock the rest of A pod down. All residents involved were taken to medical to see if any injuries had ocured [REDACTED] need medical attention.

Staff Signature: 	Date: 2/5/2022
Incident result in injury to resident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incident result in Injury to staff? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, was treatment received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Restraints used on resident #1, #2, or #3? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	For how long? n/a
If so, what kind of restraints? Choose an item	

STAFF INVOLVED

List below the title, and names of all the officers/staff involved.

Title	Staff Name	Reason for Involvement
Youth Care Professional	Tamicia Hamilton	On Duty
Youth Care Professional	Chris McGee	On Duty
Youth Care Professional	Chris Griffith	On Duty
Youth Care Professional	Dino Pickett	On Duty
Youth Care Professional	Johanna Waits	On Duty

EVENTS LEADING TO THE INCIDENT (place an (X) by the appropriate event)	THE CIRCUMSTANCE WHY FORCE WAS USED (place an (X) by the appropriate event)
Searches <input type="checkbox"/> Assault on staff <input type="checkbox"/> Assault on a resident <input checked="" type="checkbox"/> Non-compliance <input checked="" type="checkbox"/> Court appearance <input type="checkbox"/> Moving to another room <input type="checkbox"/> Other: <input type="checkbox"/>	Preventing injury to self <input checked="" type="checkbox"/> Preventing injury to staff <input checked="" type="checkbox"/> Preventing injury to other resident <input checked="" type="checkbox"/> Preventing damage to property <input type="checkbox"/> Preventing an escape <input type="checkbox"/> Other: <input type="checkbox"/>

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Was the resident placed in EBMC? ☒ Yes ☐ No

Date IN	Time IN	Date OUT	Time OUT
2/5/2022	1320pm		

Shift Supervisor Approved EBMC? ☒ Yes ☐ No

Signature _____

HENLEY-YOUNG JUVENILE JUSTICE CENTER

UNUSUAL INCIDENT REPORT

INFORMATION ABOUT THE INCIDENT AND PERSON INVOLVED

(1) Resident Name: Apod Residents		(2) Resident Name:	
(3) Resident Name:		Date of Occurrence: 2/5/2022	
Time of Occurrence: 1330 pm		Time of Report: 1545	
Person Reporting: YCP Johanna Waits		Location of Incident: Rec Yard	
Type of Incident/Infraction Code: Fight			

NARRATIVE (Describe what happen, how it happen, and factors leading to the incident. Was any verbal reasoning used to de-escalate the situation initially and/or during the incident? Be as specific as possible)

On February 5th, 2022 at approximately 1330, I, YCP Johanna Waits responded to a code yellow on the rec yard. I, YCP Johanna Waits proceeded to break up a fight between the residents. On A Pod. I use the CPI child restraint technique to regain control over the residents on the rec yard. I, YCP Johanna Waits helped escort the males to medical for treatment.

Staff Signature:		Date: 2/5/2022	
Incident result in injury to resident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Incident result in Injury to staff? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, was treatment received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Restraints used on resident #1, #2, or #3? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		For how long? n/a	
If so, what kind of restraints? Choose an item			

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Youth Care Professional	Tamicia Hamilton	On Duty
Youth Care Professional	Chris McGee	On Duty
Youth Care Professional	Chris Griffith	On Duty
Youth Care Professional	Dino Pickett	On Duty
Youth Care Professional	Johanna Waits	On Duty

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Searches <input type="checkbox"/>	Preventing injury to self <input checked="" type="checkbox"/>
Assault on staff <input type="checkbox"/>	Preventing injury to staff <input checked="" type="checkbox"/>
Assault on a resident <input checked="" type="checkbox"/>	Preventing injury to other resident <input checked="" type="checkbox"/>
Non-compliance <input checked="" type="checkbox"/>	Preventing damage to property <input type="checkbox"/>
Court appearance <input type="checkbox"/>	Preventing an escape <input type="checkbox"/>
Moving to another room <input type="checkbox"/>	Other: <input type="checkbox"/>
Other: <input type="checkbox"/>	

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Was the resident placed in EBMC? ☒ Yes ☐ No

Date IN	Time IN	Date OUT	Time OUT
2/5/2022	1330pm		

Shift Supervisor Approved EBMC? ☒ Yes ☐ No

Signature _____

HENLEY-YOUNG JUVENILE JUSTICE CENTER


UNUSUAL INCIDENT REPORT

INFORMATION ABOUT THE INCIDENT AND PERSON INVOLVED

(1) Resident Name: Apod Residents		(2) Resident Name:	
(3) Resident Name:		Date of Occurrence: 2/5/2022	
Time of Occurrence: 1330 pm		Time of Report: 1600	
Person Reporting: YCP Christopher Griffith		Location of Incident: Rec Yard	
Type of Incident/Infraction Code: Fight			

NARRATIVE (Describe what happen, how it happen, and factors leading to the incident. Was any verbal reasoning used to de-escalate the situation initially and/or during the incident? Be as specific as possible)

On February 5th, 2022 at approximately 1320, I, YCP Griffith and YCP McGee was taking A-pod unit outside to the Rec Yard at 1320. I YCP Griffith started playing basketball with some of the residents. Then Approximately at 1330 [REDACTED] started arguing then the fight began between them while YCP McGee was breaking the fight up I YCP Griffith called Code Yellow. then [REDACTED] jumped in the fight kicking and punching [REDACTED] YCP Waits came to assist YCP Griffith and YCP McGee to help break up the fight and to separate them from each other. while moving them away [REDACTED] pulled out a shank while on the court once i seen it. I YCP Griffith and YCP McGee rushed over to retrieve it from him. [REDACTED] had dropped it and I YCP Griffith picked it up and gave it to SYCP Bouldin. Then YCP Pickett and SYCP Bouldin came on the Rec Yard to assist as well by starting to take a few residents at a time to their room. everyone that was involved did seek medical attention also SYCP Marshall, Mr. Burnside and Director M. Crisler was notified about the situation.

Staff Signature: 	Date: 2/5/2022
Incident result in injury to resident? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incident result in Injury to staff? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, was treatment received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Restraints used on resident #1, #2, or #3? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	For how long? n/a
If so, what kind of restraints? Choose an item	

STAFF INVOLVED

List below the title, and names of all the officers/staff involved.

Title	Staff Name	Reason for Involvement
Youth Care Professional	Tamicia Hamilton	On Duty
Youth Care Professional	Chris McGee	On Duty
Youth Care Professional	Chris Griffith	On Duty
Youth Care Professional	Dino Pickett	On Duty
Youth Care Professional	Johanna Waits	On Duty

EVENTS LEADING TO THE INCIDENT (place an (X) by the appropriate event)	THE CIRCUMSTANCE WHY FORCE WAS USED (place an (X) by the appropriate event)
Searches <input type="checkbox"/>	Preventing injury to self <input checked="" type="checkbox"/>
Assault on staff <input type="checkbox"/>	Preventing injury to staff <input checked="" type="checkbox"/>
Assault on a resident <input checked="" type="checkbox"/>	Preventing injury to other resident <input checked="" type="checkbox"/>
Non-compliance <input checked="" type="checkbox"/>	Preventing damage to property <input type="checkbox"/>
Court appearance <input type="checkbox"/>	Preventing an escape <input type="checkbox"/>
Moving to another room <input type="checkbox"/>	Other: <input type="checkbox"/>
Other: <input type="checkbox"/>	

EMERGENCY BEHAVIOR MANAGEMENT CONFINEMENT

Emergency behavior management confinement shall only be a cooling off period for residents where placement of the resident in a room either locked or unlocked for the purpose of controlling out of control behavior, restoring order, correcting undesirable behavior and to achieve compliance with behavioral rules and expectations.

Was the resident placed in EBMC? ☒ Yes ☐ No

Date IN	Time IN	Date OUT	Time OUT
2/5/2022	1330pm		

Shift Supervisor Approved EBMC? ☒ Yes ☐ No

Signature _____

CHAIN-OF- CUSTODY TRACKING FORM

**** INCIDENT REPORT SHALL BE COMPLETED WHENEVER CONTRABAND IS FOUND****

Date Found	2-5-22	Time Found	1340
Resident Name(s)	[REDACTED]		
Staff Finding Contraband			
Location of Contraband Found	Rec. Yard		
Description of Evidence	Half pair of scissors - scissors		

- Each individual receiving the evidence must sign for it in order to maintain documentation for chain of evidence.
- Staple the chain of custody form to the evidence bag.
- If afterhours, place bag/form in the Central Control vault until a Supervisor can turn over contraband to Administration.
- If during working hours for administration, deliver to the Quality Assurance Coordinator along with Incident Reports.

Transferred From:	[Signature]	Transferred To:	Jalith Barks
Date of Transfer	2-5-22	Reason for Transfer	Administration
Signature of Transferor	[Signature]		
Signature of Transferee	Jalith Barks		

Transferred From	Jalith Barks	Transferred To	Administration
Date of Transfer	2/5/22	Reason for Transfer	
Signature of Transferor			
Signature of Transferee	Emm Dorsey		

Final Disposition

☐ Court/Law Enforcement

☐ Disposal (Trash)

☒ Held:

Transferred To	
Authorized By	
Witnessed By	

If held, state reason(s) for holding: Evidence

HENLEY-YOUNG JUVENILE JUSTICE CENTER

SHIFT REPORT

Before the end of each shift, shift supervisors shall complete the shift report documenting the shifts daily activities. This is mandatory for all shift supervisors. A completed shift report shall be forwarded to the facility's Executive Director as well as the Operations Manager.

DAILY SHIFT REPORT

Shift: Alpha Shift (7 a.m. - 3 p.m.) Date: 2-5-22Supervisor on Duty: Bouldin

OPEN COUNT		CLOSING COUNT	
MALES/JCAA MALES	FEMALES	MALES/JCAA MALES	FEMALES
4 / 26	1 HY / 1 JCA	4 / 26	1 HY / 1 JCA

POST ASSIGNMENT

Central Control: BouldinIntake: WaitsWalter Payton: M & GeeOssie Davis: PickettJ.F.K.: HamiltonHarriet Tubman: Smith

OFF DUTY OFFICERS

EA: Marshall / Blue / Collins / Davis / MallardPL: Gatewood / _____ / _____ / _____ / _____

Call in/No Shows: _____

Comments: _____

MEDICAL

Juveniles refused for medical reason(s) prior to admission because of alleged injury, or sickness:

Juveniles returned to the facility by arresting transporting agency after receiving medical treatment:

Number of residents escorted to medical for assessment, treatment, injuries and/or sickness: 25Number of residents transported to outside facilities for medical/mental health reasons: 1

EDUCATION

Number of resident attending school: 0

Number of resident not attending school: _____

Reason each child did not attend school: _____

RESIDENT SUPERVISION

State all residents placed on suicide watch including date/time.

1. _____ 2. _____ 3. _____ 4. _____

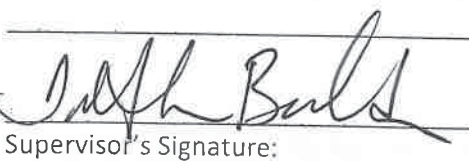
Date/Time: _____ Date/Time: _____ Date/Time: _____ Date/Time: _____

How many incidents occurred: 2 Reports written on all incidents? yes, if no, state reason why a report was not written. _____**INTAKE**

BOOKED	PARENT(S) CONTACTED	RELEASED
1.		1.
2.		2.
3.		3.
4.		4.
5.		5.
6.		6.
7.		7.
8.		8.
9.		9.
10.		10.
11.		11.
12.		12.

SUPERVISOR STAFF MEETING

Topic of discussion: _____



Supervisor's Signature:

2-5-22

Date: